

Electronic prescribing could save at least \$29bn

Janice Hopkins Tanne *New York*

The US healthcare system could save \$29bn (£16.2bn; €24.2bn) a year if doctors sent their prescriptions electronically to pharmacies, says a report from eHealth Initiative, a non-profit organisation based in Washington, DC, that aims to increase safety and efficiency in health care through information technology.

Electronic prescribing would realise savings of about \$27bn, because there would be fewer duplications of prescriptions when different doctors prescribe the same drug for a patient, and computerised databases would tell doctors about cheaper generic drugs and alert them to interactions and incorrect dosages. Another \$2bn would be saved by fewer prescribing errors resulting in doctors' visits or stays in hospital.

Janet Marchibroda, chief executive officer of eHealth Initiative, said that the 2003 Medicare Modernization Act required doctors and pharmacists to use electronic methods. The act is a major reform of the health insurance



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programme for elderly people and disabled people. It will have wide effects, as Medicare pays for much health care in the United States. The act requires standards for electronic methods to be set in place by April 2008. At present, she said, only about a third of US hospitals have computerised systems for doctors to order prescriptions. And of these hospitals only about 5% require their doctors to use them.

President Bush has called for a national electronic medical records system within 10 years and for adoption of national healthcare information standards. Tommy Thompson, secretary of health and human services, last week appointed Dr David Brailer as national health information technology coordinator. □

The report can be accessed at www.ehealthinitiative.org

EU wants every member to develop a "roadmap" for ehealth

Rory Watson *Brussels*

The European Commission is predicting that ehealth—the integration of the internet into health care—will be commonplace by the end of the decade for health professionals, patients, and the general public. This prediction is outlined in a new report released at the beginning of the month.

The report examines the extent to which information and communication technologies are being used to deliver better quality health care across Europe. It contains an action plan that ranges from the development of electronic prescriptions and computerised health records to agreement on standardised European qualifications and exchange of best practice.

Presenting the report, Erkki Liikanen, the Enterprise and Information Society's commissioner, said: "The challenges facing health care in Europe today require a bold response. The greater use of technologies and services, such as the internet, as a partner in improving health care must be encouraged."

The study confirms that ehealth is emerging as the new industry in the public health sector—with a turnover of €11bn (£7.3bn; \$13.1bn)—alongside pharmaceuticals and medical devices. By 2010, it is estimated that spending on ehealth in the 25 member European Union could amount to 5% of the total of national health budgets—a considerable increase on the 1% recorded four years ago.

A 2002 Eurobarometer survey for the EU Commission found that 78% of GPs in the union were on line—a figure that rose to 98% in Sweden and 97% in the United Kingdom. □

e-Health—Making Healthcare Better for European Citizens: An Action Plan for a European e-Health Area, COM (2004) 356 is available at www.europa.eu.int/information_society/qualif/health/index_en.htm

US doctors want to be paid for email communication with patients

Scott Gottlieb *New York*

Email is becoming a more common tool of clinical practice, enabling doctors to communicate with patients between office visits, improve diagnosis and compliance with medical treatments, and facilitate medical record keeping, says a report in the *New England Journal of Medicine* (2004;350:1705-7).

"Judging from our early experience in a practice that offers secure electronic communication, e-mail gives doctors and patients more time to think," wrote Dr Tom Delbanco and Dr Daniel Sands of the Beth Israel Deaconess Medical Center in Boston and Harvard Medical School. "Doctors and patients

move closer together, and trust grows strikingly. Interchange becomes more personal, and office visits seem more efficient and less emotionally charged."

Although many doctors continue to use conventional email, some hospitals have set up messaging systems on secure websites to protect patients' privacy. At the Beth Israel Deaconess Medical Center, 18 000 patients routinely log on to a protected website called PatientSite to request refills, write to doctors, or scan personal medical records.

"And with time offline to reflect and learn, patients appear to be better able to grasp infor-

mation that is central to their care. Indeed, one of our patients told us, 'Exchanges by e-mail are the next best thing to a house call,'" the authors wrote.

About a quarter of practising doctors, surveys show, have communicated with patients through email. But many doctors feel that it means working free of charge, and some have begun charging for email consultations.

In some cases, patients pay a flat rate from \$100 (£56; €84) to several hundred dollars a year for such services, said Dr Sands, an assistant professor of medicine at the Harvard Medical School.

Urged on by the American Medical Association and the American College of Physicians, insurers and health plans are exploring ways of paying doctors for using email, whether by the message or episode of illness. □